

104539560

**MULTIPLE INDEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		2		2		
4		2		2		
5		2		2		
6		0		1		
7			1			
8				1		
9				2		
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23			1			
24				1		
25				2		
26				1		
27				1		
28						
29						
30						
31						
32						
33						
34						
35						
36				1		
37				5		
38				1		
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50				0		
TOTAL IND.		↓	11	↓		↓
TOTAL DEP.	←		148	←		←
TOTAL CLAIMS			159			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51				0		
52				0		
53				0		
54				0		
55				0		
56			1			
57			1			
58			1			
59			1			
60						
61						
62				1		
63				2		
64				2	111	
65				2		
66			1	2		
67				1		
68				1		
69				2		
70				2		
71				2		
72				2		
73				2		
74				2		
75				2		
76				2		
77				2		
78				2	1	
79				2		
80				1		
81				1		
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←			←		←
TOTAL CLAIMS						